QDIFIED FORM PTO-1083

Richard Y. Chiang

10/719,628

November 21, 2003 PHASE RECOVERY FILTERING TECHNIQUES FOR SCP THROUGHPUT SHORTAGE

M/S ISSUE FEE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

27431

Attorney Docket No. Date: August

(Insert Customer Number)

Sir:

Transmitted herewith is an amendment in the above-identified patent application.

- Part B Fee(s) Transmittal; together with Change of Correspondence Address and Fee Address Indication Form
- Comments on Statement of Reasons for Allowance
- $\boxtimes$ Return Receipt Postcard

☐ Please charge my Deposit Accou	nt No. 50-0851 the amount of \$	. A copy of this transmittal	letter is enclosed.
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- ☑ A check in the amount of \$1,700.00 to cover the issue fee and publication fee.
- ☑ The Commissioner is hereby authorized to charge payment of the following fees with this communication or credit any overpayment to Deposit Account No. 50-0851. A duplicate copy of this transmittal letter is enclosed.
  - ☑ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
  - Any patent application processing fees under 37 CFR 1.17.

Michael A. Shimokaji, Reg.

SHIMOKAJI & ASSOCIATES, P.C. 8911 Research Drive Irvine, CA 92618 (949) 788-9961

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: M/S ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Michael A. Shimokaji, Reg. No. 32,303